

***** Draft Form Only: Do Not Submit to EPA *******Form Status: Pending Certification****Validation Status: Passed with Possible Errors**[1](#) [2](#) [3](#) [4](#) [5](#) [Additional Info](#)

(IMPORTANT: Read instructions before completing form; type or use fill-and-print form)

Form Approved OMB Number: **2025-0009**Approval Expires: **10/31/2014****Page 1 of 5**

EPA United States Environmental Protection Agency		FORM R Section 313 of the Emergency Planning and Community Right-to-know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act.		TRI Facility ID Number 24141RDFRDPOBOX	
				Toxic Chemical, Category, or Generic Name Dibutyl phthalate	
WHERE TO SEND COMPLETED FORMS:	1. TRI Data Processing Center P.O. Box 10163 Fairfax, VA 22038 *** Draft Form Only: Do Not Submit to EPA ***			2. APPROPRIATE STATE OFFICE (See instructions in Appendix F)	
This section only applies if you are revising or withdrawing a previously submitted form, otherwise leave blank:		Revision (Enter up to two code(s)) [] []		Withdrawal (Enter up to two code(s)) [] []	
Important: See Instructions to determine when "Not Applicable (NA)" boxes should be checked.					
Part I. FACILITY IDENTIFICATION INFORMATION					
SECTION 1. REPORTING YEAR : 2012					
SECTION 2. TRADE SECRET INFORMATION					
2.1 Are you claiming the toxic chemical identified on page 2 trade secret? [] Yes (Answer questions 2.2; attach substantiation forms) [X] NO (Do not answer 2.2; go to Section 3)		2.2 Is this copy [] Sanitized [] Unsanitized (Answer only if "Yes" in 2.1)			
SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)					
I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report.					
Name and official title of owner/operator or senior management official: Draft Form Only: Do Not Submit to EPA			Signature: Draft Form Only: Do Not Submit to EPA		Date Signed: XX/XX/XXXX
SECTION 4. FACILITY IDENTIFICATION					
4.1	TRI Facility ID Number 24141RDFRDPOBOX		Facility or Establishment Name BAE Systems, Ordnance Systems Inc.		
Street Radford Army Ammunition Plant, 4050 Peppers Ferry Road		Mailing Address (if different from physical street address) PO Box 1			
City/County/Tribe/State/ZIP Code Radford / Montgomery / BIA Code: / VA / 24141		City/State/ZIP Code Radford / VA / 24141		Country (Non-US)	
4.2	This report contains information for : (<u>Important</u> ; check a or b; check c or d if applicable)		a. [X] An Entire facility	b. [] Part of a facility	c. [] A Federal facility
		d. [X] GOCO			
4.3	Technical Contact name Jay Stewart		Email Address jay.stewart@baesystems.com		Telephone Number (include area code) 5406397785
4.4	Public Contact name Charlie Saks		Email Address charles.e.saks3.civ@mail.mil		Telephone Number (include area code) 5407315785
4.5	NAICS Code(s) (6 digits)		a. 325920 (Primary)	b.	c.
		d.			
		e.			
		f.			
4.6	Dun and Bradstreet Number(s) (9 digits) a. 078375499 b.				
SECTION 5. PARENT COMPANY INFORMATION					
5.1	Name of U.S. Parent Company (for TRI Reporting purposes)		BAE systems Inc., Ordnance Systems Inc.		No U.S. Parent Company (for TRI Reporting purposes) []
5.2	Parent Company's Dun & Bradstreet Number		NA []		078375499

[1](#) [2](#) [3](#) [4](#) [5](#) [Additional Info](#)**EPA FORM R**
PART II. CHEMICAL - SPECIFIC INFORMATION

TRI Facility ID Number

24141RDFRDPOBOX

Toxic Chemical, Category, or Generic Name

Dibutyl phthalate**SECTION 1. TOXIC CHEMICAL IDENTITY** (Important: DO NOT complete this section if you are reporting a mixture component in Section 2 below.)

1.1

CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)

84742

1.2

Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)

Dibutyl phthalate

1.3

Generic Chemical Name (Important: Complete only if Part I, Section 2.1 is checked "Yes". Generic Name must be structurally descriptive).

NA**SECTION 2. MIXTURE COMPONENT IDENTITY** (Important: DO NOT complete this section if you completed Section 1 above.)

2.1

Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, spaces, and punctuation.)

NA**SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY**

(Important: Check all that apply.)

3.1

Manufacture the toxic chemical:

3.2

Process the toxic chemical:

3.3

Otherwise use the toxic chemical:

a. ☐ Produce b. ☐ ImportIf produce or import:
c. ☐ For on-site use/processing
d. ☐ For sale/distribution
e. ☐ As a byproduct
f. ☐ As an impuritya. ☐ As a reactant
b. ☒ As a formulation component
c. ☐ As an article component
d. ☐ Repackaging
e. ☐ As an impuritya. ☐ As a chemical processing aid
b. ☐ As a manufacturing aid
c. ☐ Ancillary or other use**SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ON-SITE AT ANY TIME DURING THE CALENDAR YEAR**4.1 **[04]** (Enter two-digit code from instruction package.)**SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ON-SITE**

		A. Total Release (pounds/year*) (Enter range code or estimate**)	B. Basis of Estimate (Enter code)	C. Percent from Stormwater
5.1	Fugitive or non-point air emissions	NA <input type="checkbox"/>	0	
5.2	Stack or point air emissions	NA <input type="checkbox"/>	0	
5.3	Discharges to receiving streams or water bodies (Enter one name per box)	NA <input type="checkbox"/>		
Stream or Water Body Name				
5.3. 1	New River	0	M2	0%

[1](#) [2](#) [3](#) [4](#) [5](#) [Additional Info](#)**EPA FORM R**
PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number

24141RDFRDPOBOX

Toxic Chemical, Category, or Generic Name

Dibutyl phthalate**SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ON-SITE (Continued)**

		NA	A. Total Release (pounds/year*) (Enter range code** or estimate)	B. Basis of Estimate (Enter code)
5.4.1	Underground Injection on-site to Class I wells	[X]		
5.4.2	Underground Injection on-site to Class II-V wells	[X]		
5.5	Disposal to land on-site			
5.5.1.A	RCRA subtitle C landfills	[X]		
5.5.1.B	Other landfills	[X]		
5.5.2	Land treatment/application farming	[X]		
5.5.3A	RCRA Subtitle C surface impoundments	[X]		
5.5.3B	Other surface impoundments	[X]		
5.5.4	Other disposal	[X]		

SECTION 6. TRANSFER(S) OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTWs) NA [**X**]

*For Dioxin and Dioxin-like Compounds, report in grams/year

**Range Codes: A=1-10 pounds; B=11-499 pounds; C=500-999 pounds.

EPA Form 9350-1 (Rev. 10/2012) - Previous editions are obsolete.

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EPA FORM R
PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number

24141RDFRDPOBOX

Toxic Chemical, Category, or Generic Name

Dibutyl phthalate

6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS | NA []

6.2.1 Off-Site EPA Identification Number (RCRA ID No.)

MND081138604

Off-Site Location Name:

ALLIANT TECHSYSTEMS PROVING GROUND

Off-Site Address:

23100 SUGAR BUSH RD. N.W.

City

SAINT FRANCIS

County

Anoka

State

MN

Zip

55070Country
(Non-US)

Is location under control of reporting facility or parent company?

[] Yes [**X**] NoA. Total Transfer (pounds/year*)
(Enter range code** or estimate)1 . **3850.6**B. Basis of Estimate
(Enter code)1 . **C**C. Type of Waste Treatment/Disposal/
Recycling/Energy Recovery (Enter code)1 . **M50**

6.2.2 Off-Site EPA Identification Number (RCRA ID No.)

LAD981055791

Off-Site Location Name:

CLEAN HARBORS COLFAX LLC

Off-Site Address:

3763 HIGHWAY 471

City

COLFAX

County

Grant

State

LA

Zip

714170000Country
(Non-US)

Is location under control of reporting facility or parent company?

[] Yes [**X**] NoA. Total Transfer (pounds/year*)
(Enter range code** or estimate)1 . **2786.6**B. Basis of Estimate
(Enter code)1 . **C**C. Type of Waste Treatment/Disposal/
Recycling/Energy Recovery (Enter code)1 . **M50**

6.2.3 Off-Site EPA Identification Number (RCRA ID No.)

IA000005876

Off-Site Location Name:

Advanced Environmental Technology Inc.

Off-Site Address:

Highway 79

City

Middletown

County

Des Moines

State

IA

Zip

52638Country
(Non-US)

Is location under control of reporting facility or parent company?

[] Yes [**X**] NoA. Total Transfer (pounds/year*)
(Enter range code** or estimate)1 . **1477.3**B. Basis of Estimate
(Enter code)1 . **C**C. Type of Waste Treatment/Disposal/
Recycling/Energy Recovery (Enter code)1 . **M50**

SECTION 7A. ON-SITE WASTE TREATMENT METHODS AND EFFICIENCY

[] Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category.

a. General
Waste Stream
(Enter code)b. Waste Treatment Method(s) Sequence
(Enter 3- or 4-character code(s))c. Waste Treatment
Efficiency
(Enter 2 character code)**7A.1a****7A.1b****7A.1c****W**2 : **H081** 3 : **H123****E4****7A.2a****7A.2b****7A.2c****S**2 : **H040****E3**

*For Dioxin and Dioxin-like Compounds, report in grams/year

EPA Form 9350-1 (Rev. 10/2012) - Previous editions are obsolete.

**Range Codes: A=1-10 pounds; B=11-499 pounds; C=500-999 pounds.

1 2 3 4 5 [Additional Info](#)

EPA FORM R
PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number

24141RDFRDPOBOX

Toxic Chemical, Category, or Generic Name

Dibutyl phthalate**SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES**[**X**] NA - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.

Energy Recovery Methods [Enter 3-character code(s)]

SECTION 7C. ON-SITE RECYCLING PROCESSES[**X**] NA - Check here if no on-site recycling is applied to any waste stream containing the toxic chemical or chemical category.

Recycling Methods [Enter 3-character code(s)]

SECTION 8. DISPOSAL OR OTHER RELEASES, SOURCE REDUCTION, AND RECYCLING ACTIVITIES

		Column A Prior Year (pounds/year*)	Column B Current Reporting Year (pounds/year*)	Column C Following Year (pounds/year*)	Column D Second Following Year (pounds/year*)
8.1					
8.1a	Total on-site disposal to Class I Underground Injection Wells, RCRA Subtitle C landfills, and other landfills	NA	NA	NA	NA
8.1b	Total other on-site disposal or other releases	24	7.3	20	20
8.1c	Total off-site disposal to Class I Underground Injection Wells, RCRA Subtitle C landfills, and other landfills	2.4	NA	5	5
8.1d	Total other off-site disposal or other releases	30	NA	NA	NA
8.2	Quantity used for energy recovery on-site	NA	NA	NA	NA
8.3	Quantity used for energy recovery off-site	NA	NA	NA	NA
8.4	Quantity recycled on-site	NA	NA	NA	NA
8.5	Quantity recycled off-site	NA	NA	NA	NA
8.6	Quantity treated on-site	4359	6616.4	9000	9000
8.7	Quantity treated off-site	NA	8114.5	9000	9000
8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with production processes (pounds/year)		NA		
8.9	Production ratio or activity index		0.48		
8.10	Did your facility engage in any newly implemented source reduction activities for this chemical during the reporting year? If so, complete the following section; if not, check NA.		NA [X]		
	Source Reduction Activities (Enter code(s))		Methods to Identify Activity (Enter code(s))		
8.10. 1	NA				

EPA Form 9350-1 (Rev. 10/2012) - Previous editions are obsolete.

*For Dioxin and Dioxin-like Compounds, report in grams/year

[1](#) [2](#) [3](#) [4](#) [5](#) [Additional Info](#)

TRI Facility ID Number

24141RDFRDPOBOX

Toxic Chemical, Category, or Generic Name

Dibutyl phthalate**Additional optional information on source reduction, recycling, or pollution control activities.****Miscellaneous, additional, or optional information regarding the Form R submission**

***** File Copy Only: Do Not Submit Paper Form to EPA *******Form Status: Certified and Sent to USEPA****Validation Status: Passed with Possible Errors**[1 2 3 4 5 Additional Info](#)

(IMPORTANT: Read instructions before completing form; type or use fill-and-print form)

Form Approved OMB Number: **2025-0009**Approval Expires: **10/31/2014****Page 1 of 5**

EPA United States Environmental Protection Agency		FORM R Section 313 of the Emergency Planning and Community Right-to-know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act.		TRI Facility ID Number 24141SDDSRPOBOX	
WHERE TO SEND COMPLETED FORMS:		1. TRI Data Processing Center P.O. Box 10163 Fairfax, VA 22038 *** File Copy Only: Do Not Submit Paper Form to EPA ***		2. APPROPRIATE STATE OFFICE (See instructions in Appendix F)	
This section only applies if you are revising or withdrawing a previously submitted form, otherwise leave blank:		Revision (Enter up to two code(s)) [RR4] [RR5]		Withdrawal (Enter up to two code(s)) [] []	
Important: See Instructions to determine when "Not Applicable (NA)" boxes should be checked.					
Part I. FACILITY IDENTIFICATION INFORMATION					
SECTION 1. REPORTING YEAR : 2012					
SECTION 2. TRADE SECRET INFORMATION					
2.1 Are you claiming the toxic chemical identified on page 2 trade secret? <input type="checkbox"/> Yes (Answer questions 2.2; attach substantiation forms) <input checked="" type="checkbox"/> NO (Do not answer 2.2; go to Section 3)		2.2 Is this copy <input type="checkbox"/> Sanitized <input type="checkbox"/> Unsanitized (Answer only if "Yes" in 2.1)			
SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)					
I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report.					
Name and official title of owner/operator or senior management official:		Signature:		Date Signed:	
File Copy Only: Do Not Submit Paper Form to EPA		File Copy Only: Do Not Submit Paper Form to EPA		XX/XX/XXXX	
SECTION 4. FACILITY IDENTIFICATION					
4.1	TRI Facility ID Number		24141SDDSRPOBOX		
Facility or Establishment Name U.S. ARMY RADFORD ARMY AMMUNITION PLANT					
Street RT 114 RADFORD ARMY AMMUNITION PLANT			Mailing Address (if different from physical street address) RADFORD ARMY AMMUNITION PLANT		
City/County/Tribe/State/ZIP Code RADFORD / Montgomery / BIA Code: / VA / 24141			City/State/ZIP Code RADFORD / VA / 24141		Country (Non-US)
4.2	This report contains information for : (<u>Important</u> ; check a or b; check c or d if applicable)		a. <input checked="" type="checkbox"/> An Entire facility	b. <input type="checkbox"/> Part of a facility	c. <input checked="" type="checkbox"/> A Federal facility
			d. <input type="checkbox"/> GOCO		
4.3	Technical Contact name	Jay Stewart	Email Address jay.stewart@baesystems.com	Telephone Number (include area code) 5406397785	
4.4	Public Contact name	Charlie Saks	Email Address charles.e.saks3.civ@mail.mil	Telephone Number (include area code) 5407315785	
4.5	NAICS Code(s) (6 digits)	a. 928110 (Primary)	b.	c.	d.
			e.	f.	
4.6	Dun and Bradstreet Number(s) (9 digits)				
	a. NA				
	b.				
SECTION 5. PARENT COMPANY INFORMATION					
5.1	Name of U.S. Parent Company (for TRI Reporting purposes)	US DEPARTMENT OF DEFENSE			No U.S. Parent Company (for TRI Reporting purposes) <input type="checkbox"/>
5.2	Parent Company's Dun & Bradstreet Number	NA <input checked="" type="checkbox"/>			

[1](#) [2](#) [3](#) [4](#) [5](#) [Additional Info](#)

EPA FORM R
PART II. CHEMICAL - SPECIFIC INFORMATION

TRI Facility ID Number

24141SDDSRPOBOX

Toxic Chemical, Category, or Generic Name

Dibutyl phthalate

SECTION 1. TOXIC CHEMICAL IDENTITY (Important: DO NOT complete this section if you are reporting a mixture component in Section 2 below.)

1.1

CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)

84742

1.2

Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)

Dibutyl phthalate

1.3

Generic Chemical Name (Important: Complete only if Part I, Section 2.1 is checked "Yes". Generic Name must be structurally descriptive).

NA

SECTION 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you completed Section 1 above.)

2.1

Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, spaces, and punctuation.)

NA

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY

(Important: Check all that apply.)

3.1

Manufacture the toxic chemical:

3.2

Process the toxic chemical:

3.3

Otherwise use the toxic chemical:

a. ☐ Produce b. ☐ Import

If produce or import:
c. ☐ For on-site use/processing
d. ☐ For sale/distribution
e. ☐ As a byproduct
f. ☐ As an impurity

a. ☐ As a reactant
b. ☒ As a formulation component
c. ☐ As an article component
d. ☐ Repackaging
e. ☐ As an impurity

a. ☐ As a chemical processing aid
b. ☐ As a manufacturing aid
c. ☐ Ancillary or other use

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ON-SITE AT ANY TIME DURING THE CALENDAR YEAR

4.1 **[04]** (Enter two-digit code from instruction package.)

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ON-SITE

		A. Total Release (pounds/year*) (Enter range code or estimate**)	B. Basis of Estimate (Enter code)	C. Percent from Stormwater
5.1	Fugitive or non-point air emissions	NA <input type="checkbox"/>	0	
5.2	Stack or point air emissions	NA <input type="checkbox"/>	0	
5.3	Discharges to receiving streams or water bodies (Enter one name per box)	NA <input type="checkbox"/>		
Stream or Water Body Name				
5.3. 1	New River	0	M2	0%

*For Dioxin and Dioxin-like Compounds, report in grams/year

**Range Codes: A=1-10 pounds; B=11-499 pounds; C=500-999 pounds.

[1](#) [2](#) [3](#) [4](#) [5](#) [Additional Info](#)**EPA FORM R**
PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number

24141SDDSRPOBOX

Toxic Chemical, Category, or Generic Name

Dibutyl phthalate**SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ON-SITE (Continued)**

		NA	A. Total Release (pounds/year*) (Enter range code** or estimate)	B. Basis of Estimate (Enter code)
5.4.1	Underground Injection on-site to Class I wells	[X]		
5.4.2	Underground Injection on-site to Class II-V wells	[X]		
5.5	Disposal to land on-site			
5.5.1.A	RCRA subtitle C landfills	[X]		
5.5.1.B	Other landfills	[X]		
5.5.2	Land treatment/application farming	[X]		
5.5.3A	RCRA Subtitle C surface impoundments	[X]		
5.5.3B	Other surface impoundments	[X]		
5.5.4	Other disposal	[X]		

SECTION 6. TRANSFER(S) OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTWs) NA [**X**]

*For Dioxin and Dioxin-like Compounds, report in grams/year

**Range Codes: A=1-10 pounds; B=11-499 pounds; C=500-999 pounds.

EPA Form 9350-1 (Rev. 10/2012) - Previous editions are obsolete.

[1](#) [2](#) [3](#) [4](#) [5](#) [Additional Info](#)**EPA FORM R**
PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number

24141SDDSRPOBOX

Toxic Chemical, Category, or Generic Name

Dibutyl phthalate**6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS**

[NA []]

6.2.1 Off-Site EPA Identification Number (RCRA ID No.)

OHD980613541

Off-Site Location Name:

HERITAGE-WTI INC

Off-Site Address:

1250 ST GEORGE ST

City

EAST LIVERPOOL

County

Columbiana

State

OH

Zip

439203471Country
(Non-US)

Is location under control of reporting facility or parent company?

[] Yes [**X**] NoA. Total Transfer (pounds/year*)
(Enter range code** or estimate)1 . **5913.6**B. Basis of Estimate
(Enter code)1 . **C**C. Type of Waste Treatment/Disposal/
Recycling/Energy Recovery (Enter code)1 . **M50**

6.2.2 Off-Site EPA Identification Number (RCRA ID No.)

MND081138604

Off-Site Location Name:

ALLIANT TECHSYSTEMS PROVING GROUND

Off-Site Address:

23100 SUGAR BUSH RD. N.W.

City

SAINT FRANCIS

County

Anoka

State

MN

Zip

55070Country
(Non-US)

Is location under control of reporting facility or parent company?

[] Yes [**X**] NoA. Total Transfer (pounds/year*)
(Enter range code** or estimate)1 . **3850.6**B. Basis of Estimate
(Enter code)1 . **C**C. Type of Waste Treatment/Disposal/
Recycling/Energy Recovery (Enter code)1 . **M50**

6.2.3 Off-Site EPA Identification Number (RCRA ID No.)

LAD981055791

Off-Site Location Name:

CLEAN HARBORS COLFAX LLC

Off-Site Address:

3763 HIGHWAY 471

City

COLFAX

County

Grant

State

LA

Zip

714170000Country
(Non-US)

Is location under control of reporting facility or parent company?

[] Yes [**X**] NoA. Total Transfer (pounds/year*)
(Enter range code** or estimate)1 . **2786.6**B. Basis of Estimate
(Enter code)1 . **C**C. Type of Waste Treatment/Disposal/
Recycling/Energy Recovery (Enter code)1 . **M50**

6.2.4 Off-Site EPA Identification Number (RCRA ID No.)

IA000005876

Off-Site Location Name:

Advanced Environmental Technology Inc.

Off-Site Address:

Highway 79

City

Middletown

County

Des Moines

State

IA

Zip

52638Country
(Non-US)

Is location under control of reporting facility or parent company?

[] Yes [**X**] NoA. Total Transfer (pounds/year*)
(Enter range code** or estimate)1 . **1477.3**B. Basis of Estimate
(Enter code)1 . **C**C. Type of Waste Treatment/Disposal/
Recycling/Energy Recovery (Enter code)1 . **M50****SECTION 7A. ON-SITE WASTE TREATMENT METHODS AND EFFICIENCY**

[] Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category.

a. General
Waste Stream
(Enter code)b. Waste Treatment Method(s) Sequence
(Enter 3- or 4-character code(s))c. Waste Treatment
Efficiency
(Enter 2 character code)**7A.1a****7A.1b****7A.1c****W**2 : **H081** 3 : **H123****E4**

NEIC VRI068E02

7A.2b

Appendix EPCRA 313 C

Radford Army Ammunition Plant (RFAAP)

S2 : **H040**

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E3

Radford, Virginia

1 2 3 4 5 [Additional Info](#)

EPA FORM R
PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number

24141SDDSRPOBOX

Toxic Chemical, Category, or Generic Name

Dibutyl phthalate**SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES**[**X**] NA - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.

Energy Recovery Methods [Enter 3-character code(s)]

SECTION 7C. ON-SITE RECYCLING PROCESSES[**X**] NA - Check here if no on-site recycling is applied to any waste stream containing the toxic chemical or chemical category.

Recycling Methods [Enter 3-character code(s)]

SECTION 8. DISPOSAL OR OTHER RELEASES, SOURCE REDUCTION, AND RECYCLING ACTIVITIES

		Column A Prior Year (pounds/year*)	Column B Current Reporting Year (pounds/year*)	Column C Following Year (pounds/year*)	Column D Second Following Year (pounds/year*)
8.1					
8.1a	Total on-site disposal to Class I Underground Injection Wells, RCRA Subtitle C landfills, and other landfills	NA	NA	NA	NA
8.1b	Total other on-site disposal or other releases	24	7.3	20	20
8.1c	Total off-site disposal to Class I Underground Injection Wells, RCRA Subtitle C landfills, and other landfills	2.4	NA	NA	NA
8.1d	Total other off-site disposal or other releases	30	NA	NA	NA
8.2	Quantity used for energy recovery on-site	NA	NA	NA	NA
8.3	Quantity used for energy recovery off-site	NA	NA	NA	NA
8.4	Quantity recycled on-site	NA	NA	NA	NA
8.5	Quantity recycled off-site	NA	NA	NA	NA
8.6	Quantity treated on-site	4359	6616.4	9000	9000
8.7	Quantity treated off-site	NA	14028.1	9000	9000
8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with production processes (pounds/year)	NA			
8.9	Production ratio or activity index	0.48			
8.10	Did your facility engage in any newly implemented source reduction activities for this chemical during the reporting year? If so, complete the following section; if not, check NA.	NA [X]			
	Source Reduction Activities (Enter code(s))	Methods to Identify Activity (Enter code(s))			
8.10. 1	NA				

EPA Form 9350-1 (Rev. 10/2012) - Previous editions are obsolete.

*For Dioxin and Dioxin-like Compounds, report in grams/year

[1](#) [2](#) [3](#) [4](#) [5](#) [Additional Info](#)

TRI Facility ID Number

24141SDDSRPOBOX

Toxic Chemical, Category, or Generic Name

Dibutyl phthalate**Additional optional information on source reduction, recycling, or pollution control activities.****Miscellaneous, additional, or optional information regarding the Form R submission**

***** Draft Form Only: Do Not Submit to EPA *******Form Status: Pending Certification****Validation Status: Passed with Possible Errors**[1](#) [2](#) [3](#) [4](#) [5](#) [Additional Info](#)

(IMPORTANT: Read instructions before completing form; type or use fill-and-print form)

Form Approved OMB Number: **2025-0009**Approval Expires: **10/31/2014****Page 1 of 5**

EPA United States Environmental Protection Agency		FORM R Section 313 of the Emergency Planning and Community Right-to-know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act.		TRI Facility ID Number 24141RDFRDPOBOX		
				Toxic Chemical, Category, or Generic Name Lead Compounds		
WHERE TO SEND COMPLETED FORMS:	1. TRI Data Processing Center P.O. Box 10163 Fairfax, VA 22038 *** Draft Form Only: Do Not Submit to EPA ***			2. APPROPRIATE STATE OFFICE (See instructions in Appendix F)		
This section only applies if you are revising or withdrawing a previously submitted form, otherwise leave blank:		Revision (Enter up to two code(s)) [] []		Withdrawal (Enter up to two code(s)) [] []		
Important: See Instructions to determine when "Not Applicable (NA)" boxes should be checked.						
Part I. FACILITY IDENTIFICATION INFORMATION						
SECTION 1. REPORTING YEAR : 2012						
SECTION 2. TRADE SECRET INFORMATION						
2.1 Are you claiming the toxic chemical identified on page 2 trade secret? [] Yes (Answer questions 2.2; attach substantiation forms) [X] NO (Do not answer 2.2; go to Section 3)		2.2 Is this copy [] Sanitized [] Unsanitized (Answer only if "Yes" in 2.1)				
SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)						
I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report.						
Name and official title of owner/operator or senior management official: Draft Form Only: Do Not Submit to EPA			Signature: Draft Form Only: Do Not Submit to EPA		Date Signed: XX/XX/XXXX	
SECTION 4. FACILITY IDENTIFICATION						
4.1	TRI Facility ID Number 24141RDFRDPOBOX		Facility or Establishment Name BAE Systems, Ordnance Systems Inc.			
Street Radford Army Ammunition Plant, 4050 Peppers Ferry Road		Mailing Address (if different from physical street address) PO Box 1				
City/County/Tribe/State/ZIP Code Radford / Montgomery / BIA Code: / VA / 24141		City/State/ZIP Code Radford / VA / 24141		Country (Non-US)		
4.2	This report contains information for : (<u>Important</u> ; check a or b; check c or d if applicable)		a. [X] An Entire facility	b. [] Part of a facility	c. [] A Federal facility	d. [X] GOCO
4.3	Technical Contact name Jay Stewart		Email Address jay.stewart@baesystems.com		Telephone Number (include area code) 5406397785	
4.4	Public Contact name Charlie Saks		Email Address charles.e.saks3.civ@mail.mil		Telephone Number (include area code) 5407315785	
4.5	NAICS Code(s) (6 digits)		a. 325920 (Primary)	b.	c.	d.
4.6	Dun and Bradstreet Number(s) (9 digits)		a. 078375499			
b.						
SECTION 5. PARENT COMPANY INFORMATION						
5.1	Name of U.S. Parent Company (for TRI Reporting purposes)		BAE systems Inc., Ordnance Systems Inc.		No U.S. Parent Company (for TRI Reporting purposes) []	
5.2	Parent Company's Dun & Bradstreet Number		NA []		078375499	

[1](#) [2](#) [3](#) [4](#) [5](#) [Additional Info](#)

EPA FORM R
PART II. CHEMICAL - SPECIFIC INFORMATION

TRI Facility ID Number

24141RDFRDPOBOX

Toxic Chemical, Category, or Generic Name

Lead Compounds

SECTION 1. TOXIC CHEMICAL IDENTITY (Important: DO NOT complete this section if you are reporting a mixture component in Section 2 below.)

1.1

CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)

N420

1.2

Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)

Lead Compounds

1.3

Generic Chemical Name (Important: Complete only if Part I, Section 2.1 is checked "Yes". Generic Name must be structurally descriptive).

NA

SECTION 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you completed Section 1 above.)

2.1

Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, spaces, and punctuation.)

NA

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY

(Important: Check all that apply.)

3.1

Manufacture the toxic chemical:

3.2

Process the toxic chemical:

3.3

Otherwise use the toxic chemical:

a. ☐ Produce b. ☐ Import

If produce or import:
c. ☐ For on-site use/processing
d. ☐ For sale/distribution
e. ☐ As a byproduct
f. ☐ As an impurity

a. ☐ As a reactant
b. ☒ As a formulation component
c. ☐ As an article component
d. ☐ Repackaging
e. ☐ As an impurity

a. ☐ As a chemical processing aid
b. ☐ As a manufacturing aid
c. ☐ Ancillary or other use

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ON-SITE AT ANY TIME DURING THE CALENDAR YEAR

4.1 **[04]** (Enter two-digit code from instruction package.)

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ON-SITE

		A. Total Release (pounds/year*) (Enter range code or estimate**)	B. Basis of Estimate (Enter code)	C. Percent from Stormwater
5.1	Fugitive or non-point air emissions	NA <input type="checkbox"/>	3447	O
5.2	Stack or point air emissions	NA <input type="checkbox"/>	126	O
5.3	Discharges to receiving streams or water bodies (Enter one name per box)	NA <input type="checkbox"/>		
Stream or Water Body Name				
5.3. 1	New River	67	M2	30%

*For Dioxin and Dioxin-like Compounds, report in grams/year

**Range Codes: A=1-10 pounds; B=11-499 pounds; C=500-999 pounds.

[1](#) [2](#) [3](#) [4](#) [5](#) [Additional Info](#)**EPA FORM R**
PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number

24141RDFRDPOBOX

Toxic Chemical, Category, or Generic Name

Lead Compounds**SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ON-SITE (Continued)**

	NA	A. Total Release (pounds/year*) (Enter range code** or estimate)	B. Basis of Estimate (Enter code)
5.4.1 Underground Injection on-site to Class I wells	[X]		
5.4.2 Underground Injection on-site to Class II-V wells	[X]		
5.5 Disposal to land on-site			
5.5.1.A RCRA subtitle C landfills	[X]		
5.5.1.B Other landfills	[X]		
5.5.2 Land treatment/application farming	[X]		
5.5.3A RCRA Subtitle C surface impoundments	[X]		
5.5.3B Other surface impoundments	[X]		
5.5.4 Other disposal	[X]		

SECTION 6. TRANSFER(S) OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTWs) NA [**X**]

*For Dioxin and Dioxin-like Compounds, report in grams/year

**Range Codes: A=1-10 pounds; B=11-499 pounds; C=500-999 pounds.

EPA Form 9350-1 (Rev. 10/2012) - Previous editions are obsolete.

[1](#) [2](#) [3](#) [4](#) [5](#) [Additional Info](#)**EPA FORM R**
PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number

24141RDFRDPOBOX

Toxic Chemical, Category, or Generic Name

Lead Compounds

6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS | NA []

6.2.1 Off-Site EPA Identification Number (RCRA ID No.)

MND081138604

Off-Site Location Name:

ALLIANT TECHSYSTEMS PROVING GROUND

Off-Site Address:

23100 SUGAR BUSH RD. N.W.

City

SAINT FRANCIS

County

Anoka

State

MN

Zip

55070Country
(Non-US)

Is location under control of reporting facility or parent company?

[] Yes [**X**] NoA. Total Transfer (pounds/year*)
(Enter range code** or estimate)1 . **538**B. Basis of Estimate
(Enter code)1 . **M2**C. Type of Waste Treatment/Disposal/
Recycling/Energy Recovery (Enter code)1 . **M99**

6.2.2 Off-Site EPA Identification Number (RCRA ID No.)

LAD981055791

Off-Site Location Name:

CLEAN HARBORS COLFAX LLC

Off-Site Address:

3763 HIGHWAY 471

City

COLFAX

County

Grant

State

LA

Zip

714170000Country
(Non-US)

Is location under control of reporting facility or parent company?

[] Yes [**X**] NoA. Total Transfer (pounds/year*)
(Enter range code** or estimate)1 . **1639**B. Basis of Estimate
(Enter code)1 . **M2**C. Type of Waste Treatment/Disposal/
Recycling/Energy Recovery (Enter code)1 . **M99**

6.2.3 Off-Site EPA Identification Number (RCRA ID No.)

IA000005876

Off-Site Location Name:

Advanced Environmental Technology Inc.

Off-Site Address:

Highway 79

City

Middletown

County

Des Moines

State

IA

Zip

52638Country
(Non-US)

Is location under control of reporting facility or parent company?

[] Yes [**X**] NoA. Total Transfer (pounds/year*)
(Enter range code** or estimate)1 . **430**B. Basis of Estimate
(Enter code)1 . **M2**C. Type of Waste Treatment/Disposal/
Recycling/Energy Recovery (Enter code)1 . **M99**

6.2.4 Off-Site EPA Identification Number (RCRA ID No.)

MOD985798164

Off-Site Location Name:

EBV EXPLOSIVES ENVIRONMENTAL C O

Off-Site Address:

3078 COUNTY RD 180

City

JOPLIN

County

Jasper

State

MO

Zip

64801Country
(Non-US)

Is location under control of reporting facility or parent company?

[] Yes [**X**] NoA. Total Transfer (pounds/year*)
(Enter range code** or estimate)1 . **7**B. Basis of Estimate
(Enter code)1 . **M2**C. Type of Waste Treatment/Disposal/
Recycling/Energy Recovery (Enter code)1 . **M99**

6.2.5 Off-Site EPA Identification Number (RCRA ID No.)

OHD083377010

Off-Site Location Name:

ENVIRONMENTAL ENTERPRISES INC

Off-Site Address:

4650 SPRING GROVE AVENUE

City

CINCINNATI

County

Hamilton

State

OH

Zip

452321920Country
(Non-US)

Is location under control of reporting facility or parent company?

NEICVP1068E02

Appendix EPCRA 313 C

Radford Army Ammunition Plant (RFAAP)

[] Yes [**X**] No

A. Total Transfer (pounds/year*)

B. Basis of Estimate

C. Type of Waste Treatment/Disposal/

Radford, Virginia

(Enter range code** or estimate)		(Enter code)		Recycling/Energy Recovery (Enter code)					
ENFORCEMENT CONFIDENTIAL 1 . S616		FOIA EXEMPT 1 . M2		1 . M94 DO NOT RELEASE					
6.2.6 Off-Site EPA Identification Number (RCRA ID No.)				MID000724831					
Off-Site Location Name:				MICHIGAN DISPOSAL					
Off-Site Address:				49350 I94 SERVICE DR.					
City	BELLEVILLE	County	Wayne	State	MI	Zip	48111	Country (Non-US)	
Is location under control of reporting facility or parent company?						[] Yes [X] No			
A. Total Transfer (pounds/year*) (Enter range code** or estimate)		B. Basis of Estimate (Enter code)		C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (Enter code)					
1 . 25		1 . M2		1 . M65					
SECTION 7A. ON-SITE WASTE TREATMENT METHODS AND EFFICIENCY									
[] Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category.									
a. General Waste Stream (Enter code)	b. Waste Treatment Method(s) Sequence (Enter 3- or 4-character code(s))				c. Waste Treatment Efficiency (Enter 2 character code)				
7A.1a	7A.1b				7A.1c				
S	2 : H040				E6				
7A.2a	7A.2b				7A.2c				
W	2 : H081 3 : H123				E6				

*For Dioxin and Dioxin-like Compounds, report in grams/year

**Range Codes: A=1-10 pounds; B=11-499 pounds; C=500-999 pounds.

1 2 3 4 5 [Additional Info](#)

EPA FORM R
PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number

24141RDFRDPOBOX

Toxic Chemical, Category, or Generic Name

Lead Compounds**SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES**[**X**] NA - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.

Energy Recovery Methods [Enter 3-character code(s)]

SECTION 7C. ON-SITE RECYCLING PROCESSES[**X**] NA - Check here if no on-site recycling is applied to any waste stream containing the toxic chemical or chemical category.

Recycling Methods [Enter 3-character code(s)]

SECTION 8. DISPOSAL OR OTHER RELEASES, SOURCE REDUCTION, AND RECYCLING ACTIVITIES

		Column A Prior Year (pounds/year*)	Column B Current Reporting Year (pounds/year*)	Column C Following Year (pounds/year*)	Column D Second Following Year (pounds/year*)
8.1					
8.1a	Total on-site disposal to Class I Underground Injection Wells, RCRA Subtitle C landfills, and other landfills	NA	NA	NA	NA
8.1b	Total other on-site disposal or other releases	2315	3640	4000	4000
8.1c	Total off-site disposal to Class I Underground Injection Wells, RCRA Subtitle C landfills, and other landfills	591.1	25	500	500
8.1d	Total other off-site disposal or other releases	19460.327	8224	10000	10000
8.2	Quantity used for energy recovery on-site	NA	NA	NA	NA
8.3	Quantity used for energy recovery off-site	NA	NA	NA	NA
8.4	Quantity recycled on-site	NA	NA	NA	NA
8.5	Quantity recycled off-site	193	NA	200	200
8.6	Quantity treated on-site	NA	NA	NA	NA
8.7	Quantity treated off-site	NA	NA	NA	NA
8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with production processes (pounds/year)	NA			
8.9	Production ratio or activity index	0.7			
8.10	Did your facility engage in any newly implemented source reduction activities for this chemical during the reporting year? If so, complete the following section; if not, check NA.	NA [X]			
	Source Reduction Activities (Enter code(s))	Methods to Identify Activity (Enter code(s))			
8.10. 1	NA				

EPA Form 9350-1 (Rev. 10/2012) - Previous editions are obsolete.

*For Dioxin and Dioxin-like Compounds, report in grams/year

[1](#) [2](#) [3](#) [4](#) [5](#) [Additional Info](#)

TRI Facility ID Number

24141RDFRDPOBOX

Toxic Chemical, Category, or Generic Name

Lead Compounds**Additional optional information on source reduction, recycling, or pollution control activities.****Miscellaneous, additional, or optional information regarding the Form R submission**

***** File Copy Only: Do Not Submit Paper Form to EPA *******Form Status: Certified and Sent to USEPA****Validation Status: Passed with Possible Errors**[1](#) [2](#) [3](#) [4](#) [5](#) [Additional Info](#)

(IMPORTANT: Read instructions before completing form; type or use fill-and-print form)

Form Approved OMB Number: **2025-0009**Approval Expires: **10/31/2014****Page 1 of 5**

EPA United States Environmental Protection Agency		FORM R Section 313 of the Emergency Planning and Community Right-to-know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act.		TRI Facility ID Number 24141SDDSRPOBOX	
WHERE TO SEND COMPLETED FORMS:		1. TRI Data Processing Center P.O. Box 10163 Fairfax, VA 22038 *** File Copy Only: Do Not Submit Paper Form to EPA ***		2. APPROPRIATE STATE OFFICE (See instructions in Appendix F) Lead Compounds	
This section only applies if you are revising or withdrawing a previously submitted form, otherwise leave blank:		Revision (Enter up to two code(s)) [RR4] [RR5]		Withdrawal (Enter up to two code(s)) [] []	
Important: See Instructions to determine when "Not Applicable (NA)" boxes should be checked.					
Part I. FACILITY IDENTIFICATION INFORMATION					
SECTION 1. REPORTING YEAR : 2012					
SECTION 2. TRADE SECRET INFORMATION					
2.1 Are you claiming the toxic chemical identified on page 2 trade secret? [] Yes (Answer questions 2.2; attach substantiation forms) [X] NO (Do not answer 2.2; go to Section 3)		2.2 Is this copy [] Sanitized [] Unsanitized (Answer only if "Yes" in 2.1)			
SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)					
I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report.					
Name and official title of owner/operator or senior management official:		Signature:		Date Signed:	
File Copy Only: Do Not Submit Paper Form to EPA		File Copy Only: Do Not Submit Paper Form to EPA		XX/XX/XXXX	
SECTION 4. FACILITY IDENTIFICATION					
4.1	TRI Facility ID Number		24141SDDSRPOBOX		
Facility or Establishment Name U.S. ARMY RADFORD ARMY AMMUNITION PLANT					
Street RT 114 RADFORD ARMY AMMUNITION PLANT			Mailing Address (if different from physical street address) RADFORD ARMY AMMUNITION PLANT		
City/County/Tribe/State/ZIP Code RADFORD / Montgomery / BIA Code: / VA / 24141			City/State/ZIP Code RADFORD / VA / 24141		Country (Non-US)
4.2	This report contains information for : (<u>Important</u> ; check a or b; check c or d if applicable)		a. [X] An Entire facility	b. [] Part of a facility	c. [X] A Federal facility
4.3	Technical Contact name		Jay Stewart	Email Address jay.stewart@baesystems.com	Telephone Number (include area code) 5406397785
4.4	Public Contact name		Charlie Saks	Email Address charles.e.saks3.civ@mail.mil	Telephone Number (include area code) 5407315785
4.5	NAICS Code(s) (6 digits)		a. 928110 (Primary)	b.	c.
4.6	Dun and Bradstreet Number(s) (9 digits)		a. NA	d.	e.
SECTION 5. PARENT COMPANY INFORMATION					
5.1	Name of U.S. Parent Company (for TRI Reporting purposes)		US DEPARTMENT OF DEFENSE		No U.S. Parent Company (for TRI Reporting purposes) []
5.2	Parent Company's Dun & Bradstreet Number		NA [X]		

[1](#) [2](#) [3](#) [4](#) [5](#) [Additional Info](#)

EPA FORM R
PART II. CHEMICAL - SPECIFIC INFORMATION

TRI Facility ID Number

24141SDDSRPOBOX

Toxic Chemical, Category, or Generic Name

Lead Compounds

SECTION 1. TOXIC CHEMICAL IDENTITY (Important: DO NOT complete this section if you are reporting a mixture component in Section 2 below.)

1.1

CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)

N420

1.2

Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)

Lead Compounds

1.3

Generic Chemical Name (Important: Complete only if Part I, Section 2.1 is checked "Yes". Generic Name must be structurally descriptive).

NA

SECTION 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you completed Section 1 above.)

2.1

Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, spaces, and punctuation.)

NA

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY

(Important: Check all that apply.)

3.1

Manufacture the toxic chemical:

3.2

Process the toxic chemical:

3.3

Otherwise use the toxic chemical:

a. ☐ Produce b. ☐ Import

If produce or import:
c. ☐ For on-site use/processing
d. ☐ For sale/distribution
e. ☐ As a byproduct
f. ☐ As an impurity

a. ☐ As a reactant
b. ☒ As a formulation component
c. ☐ As an article component
d. ☐ Repackaging
e. ☐ As an impurity

a. ☐ As a chemical processing aid
b. ☐ As a manufacturing aid
c. ☐ Ancillary or other use

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ON-SITE AT ANY TIME DURING THE CALENDAR YEAR

4.1 **[04]** (Enter two-digit code from instruction package.)

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ON-SITE

		A. Total Release (pounds/year*) (Enter range code or estimate**)	B. Basis of Estimate (Enter code)	C. Percent from Stormwater
5.1	Fugitive or non-point air emissions	NA <input type="checkbox"/>	3447	O
5.2	Stack or point air emissions	NA <input type="checkbox"/>	126	O
5.3	Discharges to receiving streams or water bodies (Enter one name per box)	NA <input type="checkbox"/>		
Stream or Water Body Name				
5.3. 1	New River	67	M2	30%

*For Dioxin and Dioxin-like Compounds, report in grams/year

**Range Codes: A=1-10 pounds; B=11-499 pounds; C=500-999 pounds.

[1](#) [2](#) [3](#) [4](#) [5](#) [Additional Info](#)**EPA FORM R**
PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number

24141SDDSRPOBOX

Toxic Chemical, Category, or Generic Name

Lead Compounds**SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ON-SITE (Continued)**

		NA	A. Total Release (pounds/year*) (Enter range code** or estimate)	B. Basis of Estimate (Enter code)
5.4.1	Underground Injection on-site to Class I wells	[X]		
5.4.2	Underground Injection on-site to Class II-V wells	[X]		
5.5	Disposal to land on-site			
5.5.1.A	RCRA subtitle C landfills	[X]		
5.5.1.B	Other landfills	[X]		
5.5.2	Land treatment/application farming	[X]		
5.5.3A	RCRA Subtitle C surface impoundments	[X]		
5.5.3B	Other surface impoundments	[X]		
5.5.4	Other disposal	[X]		

SECTION 6. TRANSFER(S) OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTWs) NA [**X**]

*For Dioxin and Dioxin-like Compounds, report in grams/year

**Range Codes: A=1-10 pounds; B=11-499 pounds; C=500-999 pounds.

EPA Form 9350-1 (Rev. 10/2012) - Previous editions are obsolete.

[1](#) [2](#) [3](#) [4](#) [5](#) [Additional Info](#)**EPA FORM R**
PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number

24141SDDSRPOBOX

Toxic Chemical, Category, or Generic Name

Lead Compounds**6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS** [NA []]

6.2.1 Off-Site EPA Identification Number (RCRA ID No.)

LAD981055791

Off-Site Location Name:

CLEAN HARBORS COLFAX LLC

Off-Site Address:

3763 HIGHWAY 471

City

COLFAX

County

Grant

State

LA

Zip

714170000Country
(Non-US)

Is location under control of reporting facility or parent company?

[] Yes [**X**] NoA. Total Transfer (pounds/year*)
(Enter range code** or estimate)1 . **1639**B. Basis of Estimate
(Enter code)1 . **M2**C. Type of Waste Treatment/Disposal/
Recycling/Energy Recovery (Enter code)1 . **M65**

6.2.2 Off-Site EPA Identification Number (RCRA ID No.)

MND081138604

Off-Site Location Name:

ALLIANT TECHSYSTEMS PROVING GROUND

Off-Site Address:

23100 SUGAR BUSH RD. N.W.

City

SAINT FRANCIS

County

Anoka

State

MN

Zip

55070Country
(Non-US)

Is location under control of reporting facility or parent company?

[] Yes [**X**] NoA. Total Transfer (pounds/year*)
(Enter range code** or estimate)1 . **538**B. Basis of Estimate
(Enter code)1 . **M2**C. Type of Waste Treatment/Disposal/
Recycling/Energy Recovery (Enter code)1 . **M99**

6.2.3 Off-Site EPA Identification Number (RCRA ID No.)

OHD083377010

Off-Site Location Name:

ENVIRONMENTAL ENTERPRISES INC

Off-Site Address:

4650 SPRING GROVE AVENUE

City

CINCINNATI

County

Hamilton

State

OH

Zip

452321920Country
(Non-US)

Is location under control of reporting facility or parent company?

[] Yes [**X**] NoA. Total Transfer (pounds/year*)
(Enter range code** or estimate)1 . **5610**B. Basis of Estimate
(Enter code)1 . **M2**C. Type of Waste Treatment/Disposal/
Recycling/Energy Recovery (Enter code)1 . **M94**

6.2.4 Off-Site EPA Identification Number (RCRA ID No.)

MOD985798164

Off-Site Location Name:

EBV EXPLOSIVES ENVIRONMENTAL C O

Off-Site Address:

3078 COUNTY RD 180

City

JOPLIN

County

Jasper

State

MO

Zip

64801Country
(Non-US)

Is location under control of reporting facility or parent company?

[] Yes [**X**] NoA. Total Transfer (pounds/year*)
(Enter range code** or estimate)1 . **7**B. Basis of Estimate
(Enter code)1 . **M2**C. Type of Waste Treatment/Disposal/
Recycling/Energy Recovery (Enter code)1 . **M65**

6.2.5 Off-Site EPA Identification Number (RCRA ID No.)

MID000724831

Off-Site Location Name:

MICHIGAN DISPOSAL

Off-Site Address:

49350 I94 SERVICE DR.

City

BELLEVILLE

County

Wayne

State

MI

Zip

48111Country
(Non-US)

Is location under control of reporting facility or parent company?

NEICVP1068E02

Appendix EPCRA 313 C

Radford Army Ammunition Plant (RFAAP)

A. Total Transfer (pounds/year*)

B. Basis of Estimate

C. Type of Waste Treatment/Disposal/

Radford, Virginia

(Enter range code** or estimate)		(Enter code)		Recycling/Energy Recovery (Enter code)			
ENFORCEMENT, CONFIDENTIAL 1. 25		FOIA EXEMPT 1. M2		1. M65 DO NOT RELEASE			

6.2.6 Off-Site EPA Identification Number (RCRA ID No.)		IAR000005876	
Off-Site Location Name:		Advanced Environmental Technology Inc.	
Off-Site Address:		Highway 79	

City	Middletown	County	Des Moines	State	IA	Zip	52638	Country (Non-US)	
Is location under control of reporting facility or parent company?						[] Yes [X] No			

A. Total Transfer (pounds/year*) (Enter range code** or estimate)		B. Basis of Estimate (Enter code)		C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (Enter code)	
1. 432		1. M2		1. M99	

6.2.7 Off-Site EPA Identification Number (RCRA ID No.)		MND081138604	
Off-Site Location Name:		ALLIANT TECHSYSTEMS PROVING GROUND	
Off-Site Address:		23100 SUGAR BUSH RD. N.W.	

City	SAINT FRANCIS	County	Anoka	State	MN	Zip	55070	Country (Non-US)	
Is location under control of reporting facility or parent company?						[] Yes [X] No			

A. Total Transfer (pounds/year*) (Enter range code** or estimate)		B. Basis of Estimate (Enter code)		C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (Enter code)	
1. 1612.7		1. C		1. M99	

SECTION 7A. ON-SITE WASTE TREATMENT METHODS AND EFFICIENCY		
[] Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category.		
a. General Waste Stream (Enter code)	b. Waste Treatment Method(s) Sequence (Enter 3- or 4-character code(s))	c. Waste Treatment Efficiency (Enter 2 character code)
7A.1a	7A.1b	7A.1c
S	2 : H040	E6
7A.2a	7A.2b	7A.2c
W	2 : H081 3 : H123	E6

*For Dioxin and Dioxin-like Compounds, report in grams/year

**Range Codes: A=1-10 pounds; B=11-499 pounds; C=500-999 pounds.

1 2 3 4 5 [Additional Info](#)

EPA FORM R
PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number

24141SDDSRPOBOX

Toxic Chemical, Category, or Generic Name

Lead Compounds**SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES**

[**X**] NA - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.

Energy Recovery Methods [Enter 3-character code(s)]

SECTION 7C. ON-SITE RECYCLING PROCESSES

[**X**] NA - Check here if no on-site recycling is applied to any waste stream containing the toxic chemical or chemical category.

Recycling Methods [Enter 3-character code(s)]

SECTION 8. DISPOSAL OR OTHER RELEASES, SOURCE REDUCTION, AND RECYCLING ACTIVITIES

		Column A Prior Year (pounds/year*)	Column B Current Reporting Year (pounds/year*)	Column C Following Year (pounds/year*)	Column D Second Following Year (pounds/year*)
8.1					
8.1a	Total on-site disposal to Class I Underground Injection Wells, RCRA Subtitle C landfills, and other landfills	NA	NA	NA	NA
8.1b	Total other on-site disposal or other releases	2315	3640	4000	4000
8.1c	Total off-site disposal to Class I Underground Injection Wells, RCRA Subtitle C landfills, and other landfills	591.1	1671	500	500
8.1d	Total other off-site disposal or other releases	19460.327	8192.7	10000	10000
8.2	Quantity used for energy recovery on-site	NA	NA	NA	NA
8.3	Quantity used for energy recovery off-site	NA	NA	NA	NA
8.4	Quantity recycled on-site	NA	NA	NA	NA
8.5	Quantity recycled off-site	193	NA	200	200
8.6	Quantity treated on-site	NA	NA	NA	NA
8.7	Quantity treated off-site	NA	NA	NA	NA
8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with production processes (pounds/year)		NA		
8.9	Production ratio or activity index		0.7		
8.10	Did your facility engage in any newly implemented source reduction activities for this chemical during the reporting year? If so, complete the following section; if not, check NA.		NA [X]		
	Source Reduction Activities (Enter code(s))		Methods to Identify Activity (Enter code(s))		
8.10. 1	NA				

EPA Form 9350-1 (Rev. 10/2012) - Previous editions are obsolete.

*For Dioxin and Dioxin-like Compounds, report in grams/year

[1](#) [2](#) [3](#) [4](#) [5](#) [Additional Info](#)

TRI Facility ID Number

24141SDDSRPOBOX

Toxic Chemical, Category, or Generic Name

Lead Compounds**Additional optional information on source reduction, recycling, or pollution control activities.****Miscellaneous, additional, or optional information regarding the Form R submission**

***** Draft Form Only: Do Not Submit to EPA *******Form Status: Pending Certification****Validation Status: Passed w/ Data Quality Alerts**[1](#) [2](#) [3](#) [4](#) [5](#) [Additional Info](#)

(IMPORTANT: Read instructions before completing form; type or use fill-and-print form)

Form Approved OMB Number: **2025-0009**Approval Expires: **10/31/2014****Page 1 of 5**

EPA United States Environmental Protection Agency		FORM R Section 313 of the Emergency Planning and Community Right-to-know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act.		TRI Facility ID Number 24141RDFRDPOBOX		
				Toxic Chemical, Category, or Generic Name Nitric acid		
WHERE TO SEND COMPLETED FORMS:	1. TRI Data Processing Center P.O. Box 10163 Fairfax, VA 22038 *** Draft Form Only: Do Not Submit to EPA ***			2. APPROPRIATE STATE OFFICE (See instructions in Appendix F)		
This section only applies if you are revising or withdrawing a previously submitted form, otherwise leave blank:		Revision (Enter up to two code(s)) [] []		Withdrawal (Enter up to two code(s)) [] []		
Important: See Instructions to determine when "Not Applicable (NA)" boxes should be checked.						
Part I. FACILITY IDENTIFICATION INFORMATION						
SECTION 1. REPORTING YEAR : 2012						
SECTION 2. TRADE SECRET INFORMATION						
2.1 Are you claiming the toxic chemical identified on page 2 trade secret? [] Yes (Answer questions 2.2; attach substantiation forms) [X] NO (Do not answer 2.2; go to Section 3)		2.2 Is this copy [] Sanitized [] Unsanitized (Answer only if "Yes" in 2.1)				
SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)						
I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report.						
Name and official title of owner/operator or senior management official: Draft Form Only: Do Not Submit to EPA			Signature: Draft Form Only: Do Not Submit to EPA		Date Signed: XX/XX/XXXX	
SECTION 4. FACILITY IDENTIFICATION						
4.1	TRI Facility ID Number 24141RDFRDPOBOX		Facility or Establishment Name BAE Systems, Ordnance Systems Inc.			
Street Radford Army Ammunition Plant, 4050 Peppers Ferry Road		Mailing Address (if different from physical street address) PO Box 1				
City/County/Tribe/State/ZIP Code Radford / Montgomery / BIA Code: / VA / 24141		City/State/ZIP Code Radford / VA / 24141		Country (Non-US)		
4.2	This report contains information for : (<u>Important</u> ; check a or b; check c or d if applicable)		a. [X] An Entire facility	b. [] Part of a facility	c. [] A Federal facility	d. [X] GOCO
4.3	Technical Contact name Jay Stewart		Email Address jay.stewart@baesystems.com		Telephone Number (include area code) 5406397785	
4.4	Public Contact name Charlie Saks		Email Address charles.e.saks3.civ@mail.mil		Telephone Number (include area code) 5407315785	
4.5	NAICS Code(s) (6 digits)		a. 325920 (Primary)	b.	c.	d.
4.6	Dun and Bradstreet Number(s) (9 digits) a. 078375499 b.					
SECTION 5. PARENT COMPANY INFORMATION						
5.1	Name of U.S. Parent Company (for TRI Reporting purposes)		BAE systems Inc., Ordnance Systems Inc.		No U.S. Parent Company (for TRI Reporting purposes) []	
5.2	Parent Company's Dun & Bradstreet Number		NA []		078375499	

[1](#) [2](#) [3](#) [4](#) [5](#) [Additional Info](#)**EPA FORM R**
PART II. CHEMICAL - SPECIFIC INFORMATION

TRI Facility ID Number

24141RDFRDPOBOX

Toxic Chemical, Category, or Generic Name

Nitric acid**SECTION 1. TOXIC CHEMICAL IDENTITY** (Important: DO NOT complete this section if you are reporting a mixture component in Section 2 below.)

1.1

CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)

7697372

1.2

Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)

Nitric acid

1.3

Generic Chemical Name (Important: Complete only if Part I, Section 2.1 is checked "Yes". Generic Name must be structurally descriptive).

NA**SECTION 2. MIXTURE COMPONENT IDENTITY** (Important: DO NOT complete this section if you completed Section 1 above.)

2.1

Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, spaces, and punctuation.)

NA**SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY**

(Important: Check all that apply.)

3.1

Manufacture the toxic chemical:

3.2

Process the toxic chemical:

3.3

Otherwise use the toxic chemical:

a. ☒ Produce b. ☐ Import

If produce or import:

c. ☒ For on-site use/processingd. ☒ For sale/distributione. ☐ As a byproductf. ☐ As an impuritya. ☒ As a reactantb. ☐ As a formulation componentc. ☐ As an article componentd. ☐ Repackaginge. ☐ As an impuritya. ☐ As a chemical processing aidb. ☐ As a manufacturing aidc. ☐ Ancillary or other use**SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ON-SITE AT ANY TIME DURING THE CALENDAR YEAR**

4.1

[06] (Enter two-digit code from instruction package.)**SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ON-SITE**

			A. Total Release (pounds/year*) (Enter range code or estimate**)	B. Basis of Estimate (Enter code)	C. Percent from Stormwater
5.1	Fugitive or non-point air emissions	NA <input type="checkbox"/>	692.2	E1	
5.2	Stack or point air emissions	NA <input type="checkbox"/>	622.9	C	
5.3	Discharges to receiving streams or water bodies (Enter one name per box)	NA <input checked="" type="checkbox"/>			
Stream or Water Body Name					
5.3.1	NA				

*For Dioxin and Dioxin-like Compounds, report in grams/year

**Range Codes: A=1-10 pounds; B=11-499 pounds; C=500-999 pounds.

[1](#) [2](#) [3](#) [4](#) [5](#) [Additional Info](#)**EPA FORM R**
PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number

24141RDFRDPOBOX

Toxic Chemical, Category, or Generic Name

Nitric acid**SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ON-SITE (Continued)**

		NA	A. Total Release (pounds/year*) (Enter range code** or estimate)	B. Basis of Estimate (Enter code)
5.4.1	Underground Injection on-site to Class I wells	[X]		
5.4.2	Underground Injection on-site to Class II-V wells	[X]		
5.5	Disposal to land on-site			
5.5.1.A	RCRA subtitle C landfills	[X]		
5.5.1.B	Other landfills	[X]		
5.5.2	Land treatment/application farming	[X]		
5.5.3A	RCRA Subtitle C surface impoundments	[X]		
5.5.3B	Other surface impoundments	[X]		
5.5.4	Other disposal	[]	0	O

SECTION 6. TRANSFER(S) OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTWs) NA [**X**]

*For Dioxin and Dioxin-like Compounds, report in grams/year

**Range Codes: A=1-10 pounds; B=11-499 pounds; C=500-999 pounds.

EPA Form 9350-1 (Rev. 10/2012) - Previous editions are obsolete.

[1](#) [2](#) [3](#) [4](#) [5](#) [Additional Info](#)**EPA FORM R**
PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number

24141RDFRDPOBOX

Toxic Chemical, Category, or Generic Name

Nitric acid

6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

NA [**X**]

6.2.1 Off-Site EPA Identification Number (RCRA ID No.)

Off-Site Location Name:

NA

Off-Site Address:

City

County

State

Zip

Country
(Non-US)

Is location under control of reporting facility or parent company?

[] Yes [] No

A. Total Transfer (pounds/year*)
(Enter range code** or estimate)B. Basis of Estimate
(Enter code)C. Type of Waste Treatment/Disposal/
Recycling/Energy Recovery (Enter code)

SECTION 7A. ON-SITE WASTE TREATMENT METHODS AND EFFICIENCY

[] Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category.

a. General
Waste Stream
(Enter code)b. Waste Treatment Method(s) Sequence
(Enter 3- or 4-character code(s))c. Waste Treatment
Efficiency
(Enter 2 character code)**7A.1a****7A.1b****7A.1c****W**2 : **H121** 3 : **H123****E2**

EPA Form 9350-1 (Rev. 10/2012) - Previous editions are obsolete.

*For Dioxin and Dioxin-like Compounds, report in grams/year
**Range Codes: A=1-10 pounds; B=11-499 pounds; C=500-999 pounds.

1 2 3 4 5 [Additional Info](#)

EPA FORM R
PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number

24141RDFRDPOBOX

Toxic Chemical, Category, or Generic Name

Nitric acid**SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES**

[**X**] NA - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.

Energy Recovery Methods [Enter 3-character code(s)]

SECTION 7C. ON-SITE RECYCLING PROCESSES

[] NA - Check here if no on-site recycling is applied to any waste stream containing the toxic chemical or chemical category.

Recycling Methods [Enter 3-character code(s)]

1. **H39****SECTION 8. DISPOSAL OR OTHER RELEASES, SOURCE REDUCTION, AND RECYCLING ACTIVITIES**

		Column A Prior Year (pounds/year*)	Column B Current Reporting Year (pounds/year*)	Column C Following Year (pounds/year*)	Column D Second Following Year (pounds/year*)
8.1					
8.1a	Total on-site disposal to Class I Underground Injection Wells, RCRA Subtitle C landfills, and other landfills	NA	NA	NA	NA
8.1b	Total other on-site disposal or other releases	2806.8	1315.1	3500	3500
8.1c	Total off-site disposal to Class I Underground Injection Wells, RCRA Subtitle C landfills, and other landfills	NA	NA	NA	NA
8.1d	Total other off-site disposal or other releases	NA	NA	NA	NA
8.2	Quantity used for energy recovery on-site	NA	NA	NA	NA
8.3	Quantity used for energy recovery off-site	NA	NA	NA	NA
8.4	Quantity recycled on-site	47970000	38885615	60000000	60000000
8.5	Quantity recycled off-site	NA	NA	NA	NA
8.6	Quantity treated on-site	12771624	7392794	11000000	11000000
8.7	Quantity treated off-site	NA	NA	NA	NA
8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with production processes (pounds/year)	NA			
8.9	Production ratio or activity index	0.62			
8.10	Did your facility engage in any newly implemented source reduction activities for this chemical during the reporting year? If so, complete the following section; if not, check NA.	NA [X]			
	Source Reduction Activities (Enter code(s))	Methods to Identify Activity (Enter code(s))			
8.10. 1	NA				

EPA Form 9350-1 (Rev. 10/2012) - Previous editions are obsolete.

*For Dioxin and Dioxin-like Compounds, report in grams/year

[1](#) [2](#) [3](#) [4](#) [5](#) [Additional Info](#)

TRI Facility ID Number

24141RDFRDPOBOX

Toxic Chemical, Category, or Generic Name

Nitric acid**Additional optional information on source reduction, recycling, or pollution control activities.****Miscellaneous, additional, or optional information regarding the Form R submission**

***** File Copy Only: Do Not Submit Paper Form to EPA *******Form Status: Certified and Sent to USEPA****Validation Status: Passed with Possible Errors**[1 2 3 4 5 Additional Info](#)Form Approved OMB Number: **2025-0009**

(IMPORTANT: Read instructions before completing form; type or use fill-and-print form)

Approval Expires: **10/31/2014**

Page 1 of 5

EPA United States Environmental Protection Agency		FORM R Section 313 of the Emergency Planning and Community Right-to-know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act.		TRI Facility ID Number 24141SDDSRPOBOX	
WHERE TO SEND COMPLETED FORMS:		1. TRI Data Processing Center P.O. Box 10163 Fairfax, VA 22038 *** File Copy Only: Do Not Submit Paper Form to EPA ***		2. APPROPRIATE STATE OFFICE (See instructions in Appendix F)	
This section only applies if you are revising or withdrawing a previously submitted form, otherwise leave blank:		Revision (Enter up to two code(s)) [RR4] [RR5]		Withdrawal (Enter up to two code(s)) [] []	
Important: See Instructions to determine when "Not Applicable (NA)" boxes should be checked.					
Part I. FACILITY IDENTIFICATION INFORMATION					
SECTION 1. REPORTING YEAR : 2012					
SECTION 2. TRADE SECRET INFORMATION					
2.1 Are you claiming the toxic chemical identified on page 2 trade secret? <input type="checkbox"/> Yes (Answer questions 2.2; attach substantiation forms) <input checked="" type="checkbox"/> NO (Do not answer 2.2; go to Section 3)		2.2 Is this copy <input type="checkbox"/> Sanitized <input type="checkbox"/> Unsanitized (Answer only if "Yes" in 2.1)			
SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)					
I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report.					
Name and official title of owner/operator or senior management official:		Signature:		Date Signed:	
File Copy Only: Do Not Submit Paper Form to EPA		File Copy Only: Do Not Submit Paper Form to EPA		XX/XX/XXXX	
SECTION 4. FACILITY IDENTIFICATION					
4.1	TRI Facility ID Number		24141SDDSRPOBOX		
Facility or Establishment Name U.S. ARMY RADFORD ARMY AMMUNITION PLANT					
Street RT 114 RADFORD ARMY AMMUNITION PLANT			Mailing Address (if different from physical street address) RADFORD ARMY AMMUNITION PLANT		
City/County/Tribe/State/ZIP Code RADFORD / Montgomery / BIA Code: / VA / 24141			City/State/ZIP Code RADFORD / VA / 24141		Country (Non-US)
4.2	This report contains information for : (<u>Important</u> ; check a or b; check c or d if applicable)	a. <input checked="" type="checkbox"/> An Entire facility	b. <input type="checkbox"/> Part of a facility	c. <input checked="" type="checkbox"/> A Federal facility	d. <input type="checkbox"/> GOCO
4.3	Technical Contact name	Jay Stewart	Email Address jay.stewart@baesystems.com	Telephone Number (include area code) 5406397785	
4.4	Public Contact name	Charlie Saks	Email Address charles.e.saks3.civ@mail.mil	Telephone Number (include area code) 5407315785	
4.5	NAICS Code(s) (6 digits)	a. 928110 (Primary)	b.	c.	d.
4.6	Dun and Bradstreet Number(s) (9 digits)				
	a. NA				
	b.				
SECTION 5. PARENT COMPANY INFORMATION					
5.1	Name of U.S. Parent Company (for TRI Reporting purposes)	US DEPARTMENT OF DEFENSE			No U.S. Parent Company (for TRI Reporting purposes) <input type="checkbox"/>
5.2	Parent Company's Dun & Bradstreet Number	NA <input checked="" type="checkbox"/>			

[1](#) [2](#) [3](#) [4](#) [5](#) [Additional Info](#)**EPA FORM R**
PART II. CHEMICAL - SPECIFIC INFORMATION

TRI Facility ID Number

24141SDDSRPOBOX

Toxic Chemical, Category, or Generic Name

Nitric acid**SECTION 1. TOXIC CHEMICAL IDENTITY** (Important: DO NOT complete this section if you are reporting a mixture component in Section 2 below.)

1.1

CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)

7697372

1.2

Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)

Nitric acid

1.3

Generic Chemical Name (Important: Complete only if Part I, Section 2.1 is checked "Yes". Generic Name must be structurally descriptive).

NA**SECTION 2. MIXTURE COMPONENT IDENTITY** (Important: DO NOT complete this section if you completed Section 1 above.)

2.1

Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, spaces, and punctuation.)

NA**SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY**

(Important: Check all that apply.)

3.1

Manufacture the toxic chemical:

3.2

Process the toxic chemical:

3.3

Otherwise use the toxic chemical:

a. ☒ Produce b. ☐ Import

If produce or import:

c. ☒ For on-site use/processingd. ☒ For sale/distributione. ☐ As a byproductf. ☐ As an impuritya. ☒ As a reactantb. ☐ As a formulation componentc. ☐ As an article componentd. ☐ Repackaginge. ☐ As an impuritya. ☐ As a chemical processing aidb. ☐ As a manufacturing aidc. ☐ Ancillary or other use**SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ON-SITE AT ANY TIME DURING THE CALENDAR YEAR**4.1 **[06]** (Enter two-digit code from instruction package.)**SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ON-SITE**

			A. Total Release (pounds/year*) (Enter range code or estimate**)	B. Basis of Estimate (Enter code)	C. Percent from Stormwater
5.1	Fugitive or non-point air emissions	NA <input type="checkbox"/>	692.2	E1	
5.2	Stack or point air emissions	NA <input type="checkbox"/>	622.9	C	
5.3	Discharges to receiving streams or water bodies (Enter one name per box)	NA <input type="checkbox"/>			
Stream or Water Body Name					
5.3.1	New River		0	M2	0%

*For Dioxin and Dioxin-like Compounds, report in grams/year

**Range Codes: A=1-10 pounds; B=11-499 pounds; C=500-999 pounds.

[1](#) [2](#) [3](#) [4](#) [5](#) [Additional Info](#)**EPA FORM R**
PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number

24141SDDSRPOBOX

Toxic Chemical, Category, or Generic Name

Nitric acid**SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ON-SITE (Continued)**

	NA	A. Total Release (pounds/year*) (Enter range code** or estimate)	B. Basis of Estimate (Enter code)
5.4.1	Underground Injection on-site to Class I wells	[X]	
5.4.2	Underground Injection on-site to Class II-V wells	[X]	
5.5	Disposal to land on-site		
5.5.1.A	RCRA subtitle C landfills	[X]	
5.5.1.B	Other landfills	[X]	
5.5.2	Land treatment/application farming	[X]	
5.5.3A	RCRA Subtitle C surface impoundments	[X]	
5.5.3B	Other surface impoundments	[X]	
5.5.4	Other disposal	[X]	

SECTION 6. TRANSFER(S) OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTWs) NA [**X**]

*For Dioxin and Dioxin-like Compounds, report in grams/year

**Range Codes: A=1-10 pounds; B=11-499 pounds; C=500-999 pounds.

EPA Form 9350-1 (Rev. 10/2012) - Previous editions are obsolete.

[1](#) [2](#) [3](#) [4](#) [5](#) [Additional Info](#)**EPA FORM R**
PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number

24141SDDSRPOBOX

Toxic Chemical, Category, or Generic Name

Nitric acid

6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS |NA []

6.2.1 Off-Site EPA Identification Number (RCRA ID No.)

MID074259565

Off-Site Location Name:

DYNECOL INC

Off-Site Address:

6520 GEORGIA

City

DETROIT

County

Wayne

State

MI

Zip

482111594Country
(Non-US)

Is location under control of reporting facility or parent company?

[] Yes [**X**] NoA. Total Transfer (pounds/year*)
(Enter range code** or estimate)1 . **7040.6**B. Basis of Estimate
(Enter code)1 . **C**C. Type of Waste Treatment/Disposal/
Recycling/Energy Recovery (Enter code)1 . **M95**

6.2.2 Off-Site EPA Identification Number (RCRA ID No.)

TXD000838896

Off-Site Location Name:

**VEOLIA ES TECHNICAL SOLUTIONS LLC PORT ARTHUR
FACILITY**

Off-Site Address:

7665 HWY 73

City

PORT ARTHUR

County

Jefferson

State

TX

Zip

776432563Country
(Non-US)

Is location under control of reporting facility or parent company?

[] Yes [**X**] NoA. Total Transfer (pounds/year*)
(Enter range code** or estimate)1 . **872**B. Basis of Estimate
(Enter code)1 . **C**C. Type of Waste Treatment/Disposal/
Recycling/Energy Recovery (Enter code)1 . **M95**

SECTION 7A. ON-SITE WASTE TREATMENT METHODS AND EFFICIENCY

[] Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category.

a. General
Waste Stream
(Enter code)**7A.1a****W**b. Waste Treatment Method(s) Sequence
(Enter 3- or 4-character code(s))**7A.1b**2 : **H121** 3 : **H123**c. Waste Treatment
Efficiency
(Enter 2 character code)**7A.1c****E2**

*For Dioxin and Dioxin-like Compounds, report in grams/year

**Range Codes: A=1-10 pounds; B=11-499 pounds; C=500-999 pounds.

EPA Form 9350-1 (Rev. 10/2012) - Previous editions are obsolete.

[1](#) [2](#) [3](#) [4](#) [5](#) [Additional Info](#)

EPA FORM R PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)	TRI Facility ID Number
	24141SDDSRPOBOX
	Toxic Chemical, Category, or Generic Name
	Nitric acid

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

[☒] NA - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.

Energy Recovery Methods [Enter 3-character code(s)]

SECTION 7C. ON-SITE RECYCLING PROCESSES

[] NA - Check here if no on-site recycling is applied to any waste stream containing the toxic chemical or chemical category.

Recycling Methods [Enter 3-character code(s)]

1. H39

SECTION 8. DISPOSAL OR OTHER RELEASES, SOURCE REDUCTION, AND RECYCLING ACTIVITIES

		Column A Prior Year (pounds/year*)	Column B Current Reporting Year (pounds/year*)	Column C Following Year (pounds/year*)	Column D Second Following Year (pounds/year*)
8.1					
8.1a	Total on-site disposal to Class I Underground Injection Wells, RCRA Subtitle C landfills, and other landfills	NA	NA	NA	NA
8.1b	Total other on-site disposal or other releases	2806.8	1315.1	3500	3500
8.1c	Total off-site disposal to Class I Underground Injection Wells, RCRA Subtitle C landfills, and other landfills	NA	NA	NA	NA
8.1d	Total other off-site disposal or other releases	NA	NA	NA	NA
8.2	Quantity used for energy recovery on-site	NA	NA	NA	NA
8.3	Quantity used for energy recovery off-site	NA	NA	NA	NA
8.4	Quantity recycled on-site	47970000	38885615	60000000	60000000
8.5	Quantity recycled off-site	NA	NA	NA	NA
8.6	Quantity treated on-site	12771624	7392794	11000000	11000000
8.7	Quantity treated off-site	NA	7912.6	10000	10000
8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with production processes (pounds/year)	NA			
8.9	Production ratio or activity index	0.62			
8.10	Did your facility engage in any newly implemented source reduction activities for this chemical during the reporting year? If so, complete the following section; if not, check NA.	NA <input checked="" type="checkbox"/>			
	Source Reduction Activities (Enter code(s))	Methods to Identify Activity (Enter code(s))			
8.10. 1	NA				

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*For Dioxin and Dioxin-like Compounds, report in grams/year

[1](#) [2](#) [3](#) [4](#) [5](#) [Additional Info](#)

TRI Facility ID Number

24141SDDSRPOBOX

Toxic Chemical, Category, or Generic Name

Nitric acid**Additional optional information on source reduction, recycling, or pollution control activities.****Miscellaneous, additional, or optional information regarding the Form R submission**